

CSSSA Music Application—2015

POSTMARK DEADLINE: February 28, 2015

PLEASE TYPE OR PRINT IN BLUE OR BLACK INK ONLY.

1. MUSIC APPLICATION

If you wish to apply to more than ONE department, you must print and complete the application for that department and submit in a separate envelope. Also, if applying to more than one section of music, you must submit separate applications and audition materials—each music application must be sent in separate envelopes addressed to the specific music section.

Music (check only one): ☐ Vocal

☐ Instrument: Primary Instrument: _____

Music Portfolio Required Format: Secondary Instrument: _____

☐ USB Flash Drive

*only accepted file types: .avi, .mov,
or .mp4*

2. STUDENT INFORMATION

Student Legal First Name: _____ Middle Initial: _____

Legal Last Name: _____

Home Address (mailing): _____

City: _____

State: _____ Zip: _____ California County: _____

Country: _____

Email address: _____

Date of Birth (use numbers): ____/____/____.

Age: _____

Gender: ☐ male ☐ female

Grade Level to be completed as of June 2015: _____

Home Phone: (____) ____-_____

Student Cell Phone: (____) ____-_____

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3. PARENT/GUARDIAN INFORMATION

Parent/Guardian First Name: _____

Last Name: _____

Home Phone: (____) _____ - _____

Work Phone: (____) _____ - _____

Parent/Guardian Cell Phone: (____) _____ - _____

Email address: _____

4. SCHOOL INFORMATION

Current School: _____

Phone: (____) _____ - _____

Street Address: _____

City: _____

State: _____ Zip: _____

California County: _____

5. ATTENDANCE VERIFICATION

To verify your attendance at a California secondary school, please submit either a current unofficial transcript of your academic record, or have your teacher or counselor complete the Attendance Verification form (page 9).

6. RECOMMENDATION INFORMATION

Please identify two people who will complete the Recommendation Forms on your behalf. These people should be school teachers, private instructors, or arts professionals in your chosen subject area. Recommendations may be submitted on school stationery if the recommender prefers that, but they **MUST** be enclosed with this application.

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FIRST RECOMMENDATION:

Name: _____

Position: _____

School (if applicable): _____

School Street Address: _____

City/County: _____

State: _____ Zip: _____ Country (if outside of US): _____

SECOND RECOMMENDATION:

Name: _____

Position: _____

School (if applicable): _____

School Street Address: _____

City/County: _____

State: _____ Zip: _____ Country (if outside of US): _____

7. WHERE DID YOU LEARN ABOUT California State Summer School for the Arts?

☐ Friend ☐ Family ☐ Internet ☐ Poster ☐ Teacher ☐ School Administration

☐ Local Arts Organization ☐ Other (Specify): _____

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9. DO YOU REQUIRE ANY SPECIAL SERVICES FOR REASON OF A DISABILITY?

Physical:

☐ None

Legally blind/visually impaired

☐ Mobility impairment (including orthopedic)

☐ Other impairment (please specify): _____

Communication:

None

☐ Speech impairment

☐ Hearing impairment

☐ Learning disability

Please describe:

10. ETHNIC INFORMATION This question is voluntary. The California State Summer School for the Arts collects this information to conform to new guidelines from the Federal government. This information will not affect any student's application for admission.

Check one:

Decline to state

☐ American Indian or Alaska Native

☐ Asian

☐ Black or African-American

☐ Hispanic

☐ Native Hawaiian or other Pacific Islander

☐ White

☐ Other _____

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11. EDUCATIONAL INFORMATION

How many years have you studied your primary art form?

(1) In your school: _____

(2) Private study: _____

Please describe your education plans beyond high school:

If you attended CSSSA previously, please check the year(s) and indicate department(s):

☐ 2011 ☐ 2012 ☐ 2013 ☐ 2014 Department(s):

12. FILING INSTRUCTIONS

Mail all forms, the assignments for your department, and the application fee postmarked on or before February 28, 2015 to the Department you are applying to at:

California State Summer School for the Arts

ATTENTION: Music Department

P.O. Box 1077

Sacramento, CA 95812-1077

- You MUST write the Department you are applying to on the outside of the envelope.
- A non-refundable \$20 APPLICATION FEE is required:

☐ CHECK or MONEY ORDER made payable to "CSSSA"

☐ VISA ☐ MasterCard

Card # _____ Expires Mo. _____ Yr. _____

Three digit security number found on back of card: _____

Contact: (916) 229-5160 / (916) 229-5170 (fax) / www.application@csssa.org

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California State Summer School for the Arts 2015 Program
RECOMMENDATION FORM
POSTMARK DEADLINE: February 28, 2015

To the Student: **YOU NEED TO PRINT AND SUBMIT TWO OF THESE FORMS!**

Two individual adults need to fill out a recommendation form for you. Please make sure that your two recommendations and all other parts of your application, including the Required Assignments, are submitted in the same envelope postmarked on or before February 28, 2015. Your application cannot be completely processed until ALL REQUIRED FORMS AND RECOMMENDATIONS are received. Teachers may submit written recommendations on school stationery, if they prefer.

1. STUDENT INFORMATION

Students please fill in the student information portion of this form before providing it to the individual who will be recommending you.

Student Name: _____

2. RECOMMENDING ADULT: (Teacher, private instructor or other recommending adult).

Name of recommending individual:

Recommender's School Street Address:

City: _____

State: _____ Zip: _____

Email Address: _____

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Recommender's Phone: (____) _____ - _____

Subject Taught: _____

How many years have you known this student and in what capacity:

Indicate below your evaluation of the applicant:

1. Interest in chosen area:

☐ Below Average ☐ Average ☐ Above Average ☐ Superior

2. Ability in chosen area:

☐ Below Average ☐ Average ☐ Above Average ☐ Superior

3. Character:

☐ Below Average ☐ Average ☐ Above Average ☐ Superior

4. Cooperation:

☐ Below Average ☐ Average ☐ Above Average ☐ Superior

5. Emotional Maturity:

☐ Below Average ☐ Average ☐ Above Average ☐ Superior

6. Personal Initiative:

☐ Below Average ☐ Average ☐ Above Average ☐ Superior

Please attach any additional comments.

Signature: _____ Date: _____

3. Return completed form to student (May be sealed for confidentiality) or mail directly to

CSSSA at:

California State Summer School for the Arts
ATTENTION: Letter of Recommendation
P.O. Box 1077
Sacramento, CA 95812-1077

Contact: (916) 229-5160 / (916) 229-5170 (fax) / www.application@csssa.org

This form should be completed by a parent/guardian. You will need information from your filed 2012 or 2013 income taxes (whichever is most recently filed).

Submit only if you wish to be considered for CSSSA financial assistance. Requesting financial assistance will not affect the outcome of your child's CSSSA application. Financial assistance is restricted to California students only.

POSTMARK DEADLINE: February 28TH.

STUDENT INFORMATION

First Name	Last Name
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PARENT/GUARDIAN INFORMATION

First Name	Last Name		
Mailing Address	City	State	Zip Code
Phone	E-mail	Are you the: <input type="checkbox"/> Parent <input type="checkbox"/> Guardian	

PARENTS ADJUSTED GROSS INCOME (AGI)

Forms: 1040 - Line 37; 1040A - Line 21; 1040EZ - Line 4

Earned by Father/Guardian \$

Earned by Mother/Guardian \$

ANNUAL SOCIAL SECURITY OR DISABILITY BENEFITS

Report benefits received by the entire family. Omit educational benefits. Do not report money included in AGI above. . .

NON-TAXABLE INCOME.

Include any:

- Untaxed unemployment compensation
- Interest and dividend exclusions
- Military, or clergy housing allowances
- Untaxed portion of capital gains
- Income from untaxed municipal bonds
- Child support
- Non-taxable retirement payouts
- Non-educational veterans' benefits

TOTAL \$

Size of Household

Include parents, all dependent children, and other dependents who you claim.

Number of dependents who will be full-time college students in the fall

Un-Reimbursed Medical Expenses

Only report if your amount of un-reimbursed expenses is greater than 7.5% of your AGI above. \$

In order to complete this financial aid application you must submit:

1. A copy of your filed 2012 or 2013 Federal tax forms, please do not include schedules and black out all Social Security Numbers. If you will not file tax forms, please provide appropriate income documentation.
2. A brief paragraph written by parent/guardian describing any extenuating financial circumstances.
3. Documentation verifying Social Security benefits, if applicable.
4. Documentation verifying un-reimbursed medical expenses, if applicable.

I certify that the information reported on this form is accurate to the best of my knowledge.

Parent/Guardian Signature

Date

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California State Summer School for the Arts 2015 Program
ATTENDANCE VERIFICATION FORM

POSTMARK DEADLINE: February 28, 2015, with completed application

To the Student: YOU NEED TO PRINT AND SUBMIT THIS FORM, or a transcript.

- A teacher or counselor from your high school must fill out this form for you.
- Please make sure that this form and all other parts of the application are submitted without delay. Your application cannot be completely processed until ALL required forms are received by the California State Summer School for the Arts.

ATTENDANCE VERIFICATION: To verify your attendance at a secondary school, please submit either a current transcript of your academic record, or have your teacher or counselor complete the following certification:

I certify that _____ (student)

submitting this application is a bona fide student at:

_____ school.

Teacher/Counselor Name: _____

Position: _____

Signature: _____ Date: _____

Mail* this form along with your application and materials by February 28, 2015 to:

California State Summer School for the Arts
ATTENTION: Music Department
P.O. Box 1077
Sacramento, CA 95812-1077

* You MUST write the name of the Department to which you are applying to on the outside of the envelope.

Contact: (916) 229-5160 / (916) 229-5170 (fax) / www.application@csssa.org

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All applicants to the Music Program must submit completed application and teacher recommendation forms and the following **REQUIRED ASSIGNMENTS**:

ALL MUSIC APPLICANTS:

- A. An audition video recording, submitted *ONLY* on a **USB flash drive** that includes your performance of two pieces of contrasting styles that you have studied. The maximum combined performance length for the audition is six minutes.

Begin your video by stating your name, your instrument(s) and the number of years you have played each (if applicable), and the titles and composers of your selections. Then start your audition.

*ACCEPTABLE file formats for video submission: .avi, .mov or .mp4. Please do not include files in a format that is native to the program you are using to edit video (if applicable. Auditions submitted on any format other than those outlined above will **NOT** be reviewed.*

- B. In addition, ON A SEPARATE SHEET OF PAPER, write your answer to the following question: *Why do you want to attend the California State Summer School for the Arts, and what do you think you will contribute to the Music Program?*

Optional Composition Assignment:

If you have a strong interest and ability in composing, you may include a recording of ONE original composed piece. Please note this is IN ADDITION TO THE REQUIRED ASSIGNMENTS outlined above.

- A. An audition video recording, submitted *ONLY* on a USB flash drive. The maximum performance length for the audition is six minutes.
- B. Begin your video by stating your name, the title, the instrumentation of your piece and the method of composition, (software platform). After you introduce yourself, begin the one original piece that best shows your range of abilities. The music may either be a recording of a live performance or a computer realization (you do not need to video the computer). Label the USB flash drive with your name and date of birth.
- C. You **MUST** provide a copy of the notated score of your original composition. You may submit either handwritten manuscript or computerized printouts made with notation software.

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RETURNING STUDENTS: In addition, you must submit a brief statement of your specific learning objectives and reasons for wanting to return to the school. If you previously attended CSSSA in an artistic discipline other than Music, you must submit a recommendation from a CSSSA instructor in that department.

FOR ALL STUDENTS, PLEASE NOTE:

- Your audition video must be submitted on flash drive only. *Auditions submitted on any format other than those outlined above will **NOT** be reviewed.*
- Please save your assignments with your first initial and last name followed by the appropriate letter for each of the submissions. For example, John Smith would label his work as follows:

jsmith_A.mp4

jsmith_B.mp4

jsmith_C.mp4

- We DO NOT assume responsibility for the loss or damage of submissions.
AUDITION MATERIALS WILL NOT BE RETURNED.

If you are applying to both vocal and instrument, you must submit a separate application, application fee and separate flash drives with your audition videos. Clearly label the forms and audition materials with the different areas. Vocalists whose MAIN interest is acting in musical theatre should apply to the Theater Program.

Send your audition materials and written statement, completed forms and teacher recommendations, the application fee, and financial aid request with tax documentation (if applicable) in one package to:

California State Summer School for the Arts
Attn.: Music Department
P.O. Box 1077
Sacramento, CA 95812-1077